



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF FACILITIES MANAGEMENT, DESIGN AND CONSTRUCTION
PRODUCT SUBSTITUTION REQUEST

PROJECT NUMBER

PROJECT TITLE

CHECK APPROPRIATE BOX

☐

SUBSTITUTION PRIOR TO BID OPENING

(Minimum of 5 working days prior to receipt of bids as per Article 4 – Instructions to Bidders)

☐

SUBSTITUTION FOLLOWING AWARD

(Maximum of 20 working days from Notice to Proceed as per Article 3 – General Conditions)

FROM: BIDDER/CONTRACTOR (PRINT COMPANY NAME)

TO: ARCHITECT/ENGINEER (PRINT COMPANY NAME)

Bidder/contractor hereby requests acceptance of the following product or systems as a substitution in accord with provisions of Division One of the bidding documents:

SPECIFIED PRODUCT OR SYSTEM

SPECIFICATION SECTION NO.

SUPPORTING DATA:

☐

Product data for proposed substitution is attached. (Include description of product, standards, performance and test data)

☐

Sample

☐

Sample will be sent if requested.

QUALITY COMPARISON

SPECIFIED PRODUCT

SUBSTITUTION REQUEST

NAME, BRAND

CATALOG NO.

MANUFACTURER

VENDOR

PREVIOUS INSTALLATIONS

PROJECT

ARCHITECT/ENGINEER

LOCATION

DATE INSTALLED

SIGNIFICANT VARIATIONS FROM SPECIFIED PRODUCT

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REASON FOR SUBSTITUTION

DOES PROPOSED SUBSTITUTION AFFECT OTHER PARTS OF WORK?

☐ YES ☐ NO

IF YES, EXPLAIN

SUBSTITUTION REQUIRES DIMENSIONAL REVISION OR REDESIGN OF STRUCTURE OR A/E WORK

☐ YES ☐ NO

BIDDER'S/CONTRACTOR'S STATEMENT OF CONFORMANCE OF PROPOSED SUBSTITUTION TO CONTRACT REQUIREMENT:

We have investigated the proposed substitution. We believe that it is equal or superior in all respects to specified product, except as stated above; that it will provide the same warranty as specified product; that we have included complete implications of the substitution; that we will pay redesign and other costs caused by the substitution which subsequently become apparent; and that we will pay costs to modify other parts of the work as may be needed, to make all parts of the Work complete and functioning as a result of the substitution.

BIDDER/CONTRACTOR

DATE

REVIEW AND ACTION

☐ Resubmit substitution request with the following additional information:

☐ Substitution is accepted.

☐ Substitution is accepted with the following comments:

☐ Substitution is not accepted.

ARCHITECT/ENGINEER

DATE